

UTILITY PATENT APPLICATION TRANSMITTAL LETTER

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Docket No.
AP PRO META**T the Assistant C mmissi ner f r Patents:**

Transmitted herewith for filing is the patent application of:

Patrick CHOAY and Patrick BOUVERET

corresponding to French application 00/07576, filed June 14, 2000,

entitled: ECHOGENIC OR RADIO OPAQUE DEVICE FOR REMOVAL FROM OR TRANSFER INTO THE GENITAL ORGANS

Enclosed are:

<input checked="" type="checkbox"/>	7 pages of specification in French.
<input checked="" type="checkbox"/>	3 sheets of formal drawings.
<input type="checkbox"/>	a newly-executed declaration of the inventor.
<input type="checkbox"/>	a copy of an executed declaration of the inventor from prior application Serial No. , filed .
<input type="checkbox"/>	incorporation by reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied as indicated in the preceding box, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
<input type="checkbox"/>	an assignment of the invention to , including assignment cover sheet.
<input type="checkbox"/>	Information Disclosure Statement with Form PTO-1449.
<input type="checkbox"/>	copies of the Information Disclosure Statement citations.
<input type="checkbox"/>	preliminary amendment.
<input checked="" type="checkbox"/>	return receipt postcard (MPEP 503), specifically itemized.
<input type="checkbox"/>	applicant claims small entity status under 37 CFR 1.27.
<input type="checkbox"/>	a certified copy of the Priority Document.
<input checked="" type="checkbox"/>	other: Application Data Sheet. Abstract on a separate sheet. This application is filed in the French language and without a declaration in order to preserve Convention priority.

If a CONTINUING APPLICATION, check appropriate box and supply the requisite information.

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. , filed .

<input checked="" type="checkbox"/>	Customer No. 000466.
<input checked="" type="checkbox"/>	Correspondence address is: YOUNG & THOMPSON, 745 South 23rd Street, Second Floor, Arlington, Virginia 22202.
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(continued)Docket No.
AP PRO META**CLAIMS AS FILED**

	NO. FILED	NO. EXTRA	RATE	FEE
BASIC FEE			\$ 710	\$ 710
TOTAL CLAIMS	6 - 20 =	0	X\$ 18	0
INDEPENDENT CLAIMS	1 - 3 =	0	X\$ 80	0
MULTIPLE DEPENDENT CLAIM PRESENT			\$ 270	270

TOTAL \$ 980If applicant has small entity status under 37
CFR 1.9 and 1.27, then divide total fee by 2,
and enter amount here.**SMALL ENTITY
TOTAL**

\$

<input checked="" type="checkbox"/>	A check in the amount of \$980 to cover the filing fee is enclosed.
<input checked="" type="checkbox"/>	The Commissioner is hereby authorized to charge indicated fees and credit any over- payments to Deposit Account No. 25-0120 in the name of Young & Thompson, as described below. A duplicate copy of this sheet is enclosed.
<input type="checkbox"/>	Charge the amount of \$ as filing fee.
<input checked="" type="checkbox"/>	Credit any overpayment.
<input checked="" type="checkbox"/>	Charge any additional fee required under 37 CFR 1.16 and 1.17, during the pendency of this application.
<input type="checkbox"/>	Charge the issue fee set in 37 CFR 1.18 at the mailing of the Notice of Allowance.

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June 14, 2001